



THE ROCKEFELLER UNIVERSITY

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28 May 1986

Dear Dr. Bochkov:

I realize how busy you have been during these past few weeks in the mobilization of medical response to the Chernobyl tragedy. I presume you are also preoccupied with the planning for the followup studies needed to assure the best medical support for the more chronic consequences, and to extract the best scientific information from the incident. May I also express what so many of our colleagues share in sympathy for the people who are suffering from the accident, many of them plainly in consequence of their heroic efforts to contain it.

For the above reasons, I have waited briefly before writing to you about plans for the discussions on BW at the occasion of the CISAC meeting in Moscow this fall. We are all very pleased that this initiative can go forward, and I hope you will be personally involved.

The NAS office in Washington has cabled to Dr. Sagdeev asking whether the meeting of medical specialists can be held immediately before the CISAC, namely on 27-28 September (Saturday-Sunday), which we would prefer to 25-26. The later date would give me a better opportunity to stay over for the full CISAC; and it would make it possible for Paul Marks and Alex Rich to be part of our group.

Do you have any idea as yet who will represent your side? It would obviously be advantageous to begin some correspondence to try to organize our program in advance of the meeting. Also, if there are specialized skills or kinds of information that should be more fully emphasized in the composition of the group, I would be happy to have your suggestions.

My criteria have included a) people especially interested in the containment of BW proliferation; b) people experienced in infectious disease from either an experimental or a public health standpoint; c) people who have some knowledge of the past history of US BW programs, prior to the disarmament convention, and perhaps of contemporary research related to BW, but legally permitted under the treaty; d) people conversant with biotechnology research and its peaceful applications [these are clouded by the threat of diversion to military purposes]; e) people who have some credibility with our own policy-makers. BW has not been a high-priority target of scientific or policy concern during the last decade; so in a short time I have not necessarily been able to identify all of the most appropriate candidates, but will be working further on this during the next few months.

If our discussions can result in a level of candor and mutual confidence so that we understand our respective positions, comparable to what has been achieved in large measure for strategic weapons, I believe that will be a positive step with important ramifications for the integrity of medical research, and for the hopes of peace.

Joshua Lederberg